

INVOICE

Customer		Misc	
Name		Date	
Address		Order No.	
City	State ZIP	Rep	
Phone		·	
Qty	Description	Unit Price	
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	All Fees Associated with Ordinance 05-24	SubTotal	
		Shipping	
Payment	Check Tax Rate(s)		
Comments		TOTAL	
Name			
CC #		se Only	
Expires			
Please make check payable to Westfield Public Works			